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22903 7590 05/26/2006

COOLEY GODWARD LLP
ATTN: PATENT GROUP
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875 15TH STREET, N.W. SUITE 800
WASHINGTON, DC 20005-2221

and filed
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<i>Sherry Duncan Bitler</i>	(Depositor's name)
<i>Sherry Duncan Bitler</i>	(Signature)
August 23, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/716,193	11/17/2003	Paul J. Van Dyk	TRCX-005/02US (300171-202)	4129

TITLE OF INVENTION: SYSTEM AND METHOD FOR CONTINUOUS ONLINE SAFETY AND RELIABILITY MONITORING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/28/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
PRETLOW, DEMETRIUS R	2863	702-181000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
	1 <u>Cooley Godward LLP</u> 2 _____ 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

INVENSYS SYSTEMS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

FOXBORON MA 02035

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1283 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Date August 23, 2006

Typed or printed name Sean R. O'Dowd

Registration No. 53,403

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